

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/520,771
	Filing Date	12/05/2005
	First Named Inventor	Mohammad Reza Mehrabi
	Art Unit	1614
	Examiner Name	Timothy P. Thomas
	Attorney Docket Number	22506-001

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 60951

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 60951

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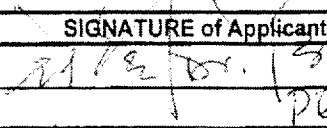
<input type="checkbox"/> Firm or Individual Name			
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	P. Kuo Wang		
Date	8/12/08	Telephone	1-353-1-4493248

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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